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# ANNUAL PERKINS PROGRAM IMPROVEMENT GRANT APPLICATION

## SECONDARY CENTERS

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**School Year  
2013-2014**

**Under the  
Carl D. Perkins  
Career and Technical Education  
Improvement Act of 2006  
(P.L. 109-270)**

### **Complete Applications due June 3, 2013**

Applications received after June 3, 2013 may not be reviewed and approved prior the proposed start date.

**Project Period: August 22, 2013 – August 21, 2014**

Bureau of Career Development  
New Hampshire State Department of Education  
21 South Fruit Street, Suite 20  
Concord, New Hampshire 03301

## **New Hampshire Department of Education Statement of Nondiscrimination**

The New Hampshire Department of Education does not discriminate on the basis of race, color, religion, marital status, national/ethnic origin, age, sex, sexual orientation, or disability in its programs, activities and employment practices. This statement is a reflection of the Department of Education and refers to, but is not limited to, the provisions of the following laws:

- Titles IV, VI, and VII of the Civil Rights Act of 1964 – race, color, national origin
- The Age Discrimination in Employment Act of 1967
- The Age Discrimination Act of 1975
- Title IX of the Education Amendments of 1972 (Title IX) – sex
- Section 504 of the Rehabilitation Act of 1973 (Section 504) – disability
- The Americans with Disabilities Act of 1990 (ADA) - disability
- NH Law against discrimination (RSA 354-A)

The following individual has been designated to handle inquiries regarding the nondiscrimination policies and laws above:

ADA/Title IX Coordinator: Office of the Deputy Commissioner

Section 504 Coordinator: Lisa Hatz

NH Department of Education  
21 South Fruit Street, Suite 20  
Concord, NH 03301  
(603) 271-3471 (V/TTY)  
1-800-299-1647  
[Lisa.Hatz@doe.nh.gov](mailto:Lisa.Hatz@doe.nh.gov)

Inquiries regarding Title VI of the Civil Rights Act of 1964, the Age Discrimination Act of 1975, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, and/or Title II of the Americans with Disabilities Act of 1990 also, or instead, may be directed to:

**U.S. Department of Education**  
Office for Civil Rights  
33 Arch Street, Suite 900  
Boston, MA 02110-1491  
(617) 289-0111  
TTY (877) 521-2172

Additionally, inquiries may also be directed to the:

**NH Commission for Human Rights**  
2 Chenell Drive  
Concord, NH 03301-8501  
(603) 271-2767

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*The funding source for this application will be 100% Federal funds from the Carl D. Perkins Career and Technical Education Act of 2006. Neither the state nor the New Hampshire Department of Education shall be liable for the funding of this application except from such funds.*

## PART I. APPLICATION GUIDE

### A. Critical Dates in the SY 2013-2014 Planning Schedule

Task	Date
Release of Final SY 2013-2014 Annual Perkins Program Improvement Application	February 8, 2013
Grants Management System (GMS) ready to accept Applications	May 1, 2013
Due date for complete application submission to the Department of Education through GMS.	June 3, 2013
SY 2012-2013 Grant End Date	August 21, 2013
SY 2013-2014 Grant Start Date	August 22, 2013
SY 2012-2013 Final Report Due	September 16, 2013
SY 2013-2014 Grant End Date	August 21, 2014

### B. Submission Instructions

The **complete application** includes both direct entry into the Department of Education's Grant Management System (GMS) as described below in 1 and the required attachments to the GMS application described below in 2.

#### 1. Direct entry into GMS:

- Cover Page: Provide required contact information.
- Full descriptions of each initiative, which include:

##### Priority box:

- Planning Area listed by number and ranked by priority as listed in **Part II, Grant Application Forms and References → B. Reference Documents → 1. Planning Areas in Priority Order**. If any Planning Area does not have at least one initiative, list the Planning Area and indicate that there is no initiative for the coming year (e.g., "No initiatives are scheduled for this planning area for school year 2013-14.").
- Initiative Number: Number continuously across all Planning Areas (i.e., do not restart numbering with each Planning Area)
- Initiative Title
- Affected Performance Indicator(s): List **only** those Performance Indicators to be directly affected by the initiative. Do not list all indicators for each initiative.
- Description of Initiative: Include the program and appropriate CIP code(s) affected, along with the description of the initiative to be undertaken.

**Activities box:**

- List specific Action Steps, and
- Budget Notes: Budget Notes must be specific; include detailed descriptions, quantities, and costs of items or services.
- **Administration is limited to 5% of your entire grant budget, including indirect costs.**

**Outcome box:**

- Rationale: How does this initiative promote program improvement? Include reference to the Performance Indicator(s) expected to improve as a result of the initiative.

**Budget Section:**

- Budget for the initiative, broken out by Function and Object Codes.

**Example:**

Function Code	Object Code	Description	Amount
1300	330	Contracted Services	\$6000.00
1300	610	Supplies	\$400.00
1300	741	Equipment	\$3,238.00
			\$9,638.00

**2. Attachments to GMS Application:** (6 MB total available for all attachments)

- a. Nondiscrimination Statement of the Receiving District
  - Recommended wording for this statement is provided in Part II of this document.
- b. ***Signed*** Certifications and Assurances Form (language found in Part II, Form 2).
  - Include the name of the superintendent or authorized designee.
  - The signature acknowledges that all Certifications and Assurances are complete and up to date.
- c. Equity Committee Contact Information and Plan
  - Provide equity contact information and a detailed equity plan for School Year 2013-2014.
- d. Programs of Study
  - Include Programs of Study for receiving AND sending districts
  - PDF or DOC format
  - If electronic files are unavailable for attachment, provide a web link to the location of the program of study on the district's website. **A link to the district's website in general is not acceptable.**
    - **For example**, if the program of study is listed on a district's "Student Information" page, the web link attached to the GMS application should be a direct link to the district's "Student Information" page, not the district's "Home" page.

- Hard copies or copies burned to CD-R media should **only** be provided in cases where electronic submittal or web links are impossible, such as when an electronic file exceeds the GMS file size limitations, or when there is no electronic or web-hosted version available.

## PART II. FORMS AND REFERENCES

### A. Grant Application Forms

#### 1. Nondiscrimination Statement:

Copy the full Nondiscrimination statement from the Career and Technical Center's Receiving District on district letterhead and attach to GMS application. (*Recommended wording for the nondiscrimination statement is located below.*):

*The [name] School district/RA does not discriminate on the basis of race, color, religion, national/ethnic origin, age, gender, disability, sexual orientation or marital status. This statement is a reflection of the [name] School District/RA and refers to, but is not limited to, the provisions of the following laws:*

*Title VI and VII of the Civil Rights Act of 1964  
The age Discrimination Act of 1967  
Title IX of the Education Amendments Act of 1972  
Section 504 of the Rehabilitation Act of 1973  
The Americans with Disabilities Act of 1975  
NH Law against Discrimination (RSA 354-A)*

*The Title IX Coordinator is: [enter name, address and telephone number]  
The Section 504 Coordinator is: [enter name, address and telephone number]*

*Inquiries may also be directed to the:*

- *US Department of Education, Office for Civil Rights, 33 Arch St. Suite 900 Boston MA 02110-1491 (617-289-0111);*
- *Equal Employment Opportunity Commission, JFK Federal Building, Room 475, Government Center, Boston MA 02201 (617-565-3200)*
- *NH Commission for Human Rights, 2 Chennell Drive, Concord, NH 03301 (603-271-2767)*

#### 2. Certifications and Assurances:

Copy the Certifications and Assurances Form on the following page onto Receiving District letterhead. Provide the name of the superintendent or authorized designee and the SAU/RA Number in the blanks provided. The signature at the bottom should match the name at the top of the form. This signature acknowledges that all certifications and assurances are complete and up to date and filed with the Department of Education. (Note that the Certifications and Assurances is different from the General Assurances document which must also be signed and submitted to the Department of Education, Audit Division.)

# **CARL D. PERKINS CAREER AND TECHNICAL EDUCATION IMPROVEMENT ACT OF 2006**

## **CERTIFICATIONS AND ASSURANCES**

I, \_\_\_\_\_ Superintendent of Schools, or authorized  
(Print)

designee, for SAU/RA number \_\_\_\_\_, certify and assure that:

1. The programs, services, and activities designated to be supported by funds through this application will be conducted in accordance with the Carl D. Perkins Career and Technical Education Improvement Act of 2006 (Perkins IV), New Hampshire Statutes, and the New Hampshire Administrative Rules.
2. Policies, procedures, and activities described in this application will be carried out as described herein.
3. Supplemental funds granted to the agency under the provisions of Perkins IV will be used as stipulated in the attached application, and supporting documents and records of expenditures will be maintained for audit in accordance with the requirements of the New Hampshire State Department of Education, Office of Business Management.
4. Student, program, and performance data, information, and reports as may be reasonably required by the NH State Department of Education will be submitted as requested, and in a timely fashion.
5. An equity committee (or another locally determined delivery method) is in place at the CTE center, charged with ensuring equal educational access and success for students in special populations inclusive of race and gender and addressing any issues and needs for improvement.
6. The Regional Advisory Committee is operational and the Advisory Committee has had an opportunity to participate in the annual application for funds.
7. An updated General Assurances form is on file with the Department of Education.

I certify that all information contained in this application is true and correct.

\_\_\_\_\_  
Signature: Superintendent or Authorized Designee

\_\_\_\_\_  
Date

### 3. Equity Contact Information and Detailed Equity Plan:

- a. Provide the following contact information for the person designated to address equity activities for your center.

Name\_\_\_\_\_

Position or Title\_\_\_\_\_

Mailing Address\_\_\_\_\_

Email Address\_\_\_\_\_ Phone\_\_\_\_\_

- b. Outline the plans for how the needs of equity and special populations (*individuals with disabilities, economically disadvantaged, non-traditional career preparations, single parents/single pregnant women, displaced homemakers, students with limited English language proficiency*) of your center will be addressed during the coming year. **Please note that “special populations” is not limited to students with disabilities. Every special population identified in the Perkins Act must be addressed.**

If you plan on using funds from this grant, equity activities and initiatives would be most appropriate as part of Planning Area 9, Special Populations.

### 4. Programs of Study for the Receiving School and all Sending Schools:

Provide the appropriate hyperlink to the Program of Study for each receiving and sending school. Links should be attached to the GMS application in either a Word document or PDF file. If a hyperlink is not available:

- a) Attach electronic files of the Program of Studies to the application (PDF or DOC format), or
- b) Submit to the Bureau an electronic version on CD+/-R or CD+/-RW media (do not use DVD+/-R or DVD+/-RW), or
- c) Submit a hard copy to the Bureau.

### B. Reference Document Web Links:

[Planning Areas in Priority Order: School Year 2013-2014](#)

[Adding a New Initiative in GMS](#)

[Perkins IV, Section 135](#)

[Perkins Act Definitions](#)

[Secondary Program Improvement Application Checklist](#) – Included for informational and reference purposes only—not a required attachment to Secondary Program Improvement Application.